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CONFIRMATION NO. 5468

<b>SERIAL NUMBER</b> 10/519,814	<b>FILING OR 371(c) DATE</b> 06/06/2005 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 12743/3
<b>APPLICANTS</b> Yoshiki Sawa, Suita-shi, JAPAN; Satoshi Taketani, Osaka-shi, JAPAN; Shigemitsu Iwai, Suita-shi, JAPAN; Hikaru Matsuda, Suita-shi, JAPAN; Masayuki Hara, Amagasaki-shi, JAPAN; Eiichiro Uchimura, Amagasaki-shi, JAPAN; Jun Miyake, Amagasaki-shi, JAPAN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/08248 06/27/2003				
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-191527 06/28/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 25	<b>TOTAL CLAIMS</b> 95
<b>INDEPENDENT CLAIMS</b> 9				
<b>ADDRESS</b> 757				
<b>TITLE</b> Decellularized tissue				
<b>FILING FEE RECEIVED</b> 6230	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	